								- 1	Application	or Do	ocket Num	per	
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001 10080 7-97												97	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			42				Γ	RATE	FEE	1	RATE	FEE	ĺ
FOR			NUMBER FILED		NUMBER EXTRA		E	BASIC FEE 370.00		OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			A 2 minus 20=		. 22			X\$ 9=		OR		396	0
INDEPENDENT CLAIMS			/ minus 3 =		* 0 _		Ī	X42=		OR	X84=	7/0	
MU	LTIPLE DEPEN	IDENT CLAIM PR	RESENT							1	000		
* If the difference in column 1 is less than zero, enter "0" in column 2								+140=	-	OR	+280= TOTAL	1131	.eD
CLAIMS AS AMENDED - PART II									<u> </u>	ION	OTHER	44.25	
9.	-9-0L C	(Column 1)	MENDED	(Colu	mn 2)	(Column 3) SMAL			ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVH PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	· 24	Minus	*4	2	=	1 F	X\$ 9=		OR	X\$18=		
AME	Independent	· /	Minus			=	ΙΓ	X42=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+140=	1	OR	+280=		1
									L		TOTAL		1
	-		DDIT. FE	: L	lou	ADDIT. FEE	L	1					
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	mn 2) 1EST 1BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE]	RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	1	X\$ 9=		OR	X\$18=		1
	Independent	*	Minus	***		=	1 F	X42=		1	X84=		1
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	<u></u>		1
							L	+140=		OR	+280=		
ADDIT										OR	TOTAL ADDIT. FEE		-
		(Column 1)			mn 2)	(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=		1
	Independent	*	Minus	***		=·]	X42=	 	1	X84=		1
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		 	1
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=		1
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE		4
		mber Previously Pa					er four	nd in the a	appropriate be	ox in co	olumn 1,	•	